

## Supplementary Online Content

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### **eAppendix.** Audit study scripts

This supplementary material has been provided by the authors to give readers additional information about their work.

## eAppendix. Audit Study Scripts

### **ORTHOPEDIC condition: Fracture of forearm, through growth plate (Salter V)**

**My 12 year old son needs an appointment with a bone specialist.**

**Male Age 12**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:  
[INFO1] **He fell on his hand and his wrist's been hurting ever since.**

→ IF ASKED TO ELABORATE:

[INFO2] **I took him to the ER and the X-ray of his arm showed a possible fracture, but they told me they weren't totally sure. They put a splint on it, and I went back to his primary care doctor and she wanted him to see an orthopedist right away.**

→ IF THE DATE IS MORE THAN 7 DAYS AWAY ADD: **The doctor said he should be seen within the next couple days. Is there something sooner?**

→ IF YOU ARE ASKED...

How long ago did the painful wrist start?

- [INFO3] **Ever since he fell on his hand two days ago.**

When did you go to the ER?

- [INFO4] **We went to the ER the day before yesterday [same day he was hurt]. They didn't see anything wrong for sure on the X-ray and sent me back to his primary care doctor.**

What happened at the primary care doctor?

- [INFO5] **She checked it out and sent me to you, because if anything his pain is getting worse.**

Do you have the X-ray from the ER?

- [INFO6] **Yes, I have copies and I can bring them with me to the appointment.**

Is he taking any medication now?

- [INFO7] **We've been giving him Advil for the pain, but that has not been working so well**

You can take him back to the ER.

- [INFO8] **I know but my doctor said I should go to your office.**

What is the name of your child's doctor?

- [PCP INFO]

What ER did you take him to?

- [INFOER]

→ IF RECEPTIONISTS SAYS THEY DON'T TAKE ANY INSURANCE OR DON'T TAKE YOUR INSURANCE:

- **Can I pay cash?**
- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

→ IF STILL NOT PROVIDED WITH AN APPOINTMENT, ASK: **Where else should I go?**

**AFTER THE CALL: FILL OUT POST-CALL EVALUATION**

**OTOLARYNGOLOGY condition: Obstructive Sleep Apnea and Chronic Bilateral Otitis Media**

**My 5 year old daughter needs an appointment with an ear, nose and throat doctor.**

**Female Age 5**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:

[INFO1] **She snores a lot, every night. She's done that for years, but it seems to be getting worse and worse. She also has fluid all the time in both her ears and frequent infections.**

→ IF ASKED TO ELABORATE:

[INFO2] **Her doctor did tests and found that her hearing is decreased. The doctor said she should see an ENT.**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **The doctor said she should be seen really soon, because with all her antibiotics making her sick to her stomach she hasn't gained weight in the last 6 months and her problems hearing may be affecting her learning at school. Is there something sooner?**

*IF YOU ARE ASKED...*

Has your daughter had a sleep study?

- [INFO3] **No she hasn't. But she snores all through the night every night.**

How long has she been snoring?

- [INFO4] **As long as I can remember. But it does seem to be getting worse.**

Has your daughter had a hearing test?

- [INFO5] **Yes, her doctor checked and her hearing is slightly decreased. I can bring the results to her appointment.**

Has your daughter had ear infections?

- [INFO6] **Yes – many. She's on daily preventive antibiotics now. [If asked for name→ Bactrim]**

Please get a sleep study first and then we will see you.

- [INFO7] **Her doctor told me she should first see the ENT before getting the test.**

What is the name of your child's doctor?

- [PCP INFO]

→ IF RECEPTIONISTS SAYS THEY DON'T TAKE ANY INSURANCE OR DON'T TAKE YOUR INSURANCE:

- **Can I pay cash?**
- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

→ IF STILL NOT PROVIDED WITH AN APPOINTMENT, ASK: **Where else should I go?**

**AFTER THE CALL: FILL OUT POST-CALL EVALUATION**

**ALLERGY-IMMUNOLOGY/ PULMONARY DISEASE condition: Asthma**

**My 14 year old son needs to see an Allergist-Immunologist [or Pulmonologist]**

**Male Age 14**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:

[INFO1] **My son has asthma that seems to be getting worse over the past few months.**

→ IF ASKED TO ELABORATE:

[INFO2] **He is on a bunch of different medications but he still gets these attacks. He is using his inhaler almost every day and has been to the ER a couple of times. His doctor asked that he be evaluated by an Allergist [or Pulmonologist].**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **He really wants to be able to play [sport] this season, and we need this to be under much better control. Is there something sooner so that he doesn't miss the [sport] season?**

→ IF YOU ARE ASKED...

What medication is he taking now?

- [INFO3] **His doctor recently put him on Albuterol (as needed) and Flovent (inhaled steroid)during the day and he takes Singulair at night.**

Is he on oral steroids? (e.g. pills/ prednisone as opposed to the inhaled steroids: Flovent)

- [INFO4] **He has been but his doctor is trying to avoid using those.**

Is he sleeping through the night?

- [INFO5] **Yes.**

When was the last time you took him to the ER?

- [INFO6] **About a week ago. I took him back to his doctor yesterday, who said I needed to take him to a specialist, since she was pretty much puzzled about why my son's breathing is getting so much worse this season.**

Is he still wheezing?

- [INFO7] **No, not at the moment.**

Perhaps he should see a different specialist, like a cardiologist?

- [INFO8] **Our doctor said we should start with a [Allergist/ Pulmonologist].**

What is the name of your child's doctor?

- [PCP INFO]

What ER did you take him to?

- [INFOER]

→ IF RECEPTIONISTS SAYS THEY DON'T TAKE ANY INSURANCE OR DON'T TAKE YOUR INSURANCE:

- **Can I pay cash?**
- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

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AFTER THE CALL: FILL OUT POST-CALL EVALUATION

**NEUROLOGY condition: New Onset Seizures**

**My 8 year old daughter needs to see a Neurologist**

**Female Age 8**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:

[INFO1] **She had a seizure last week.**

→ IF ASKED TO ELABORATE:

[INFO2] **We took her to the ER and the ER doctor called a neurologist who said that we have to see a neurologist to get a work up. Our family doctor suggested that our daughter see a neurologist in your office.**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **Well, my doctor and I are very concerned. Is there an appointment sooner than that?**

→ IF YOU ARE ASKED...

Did she have a head CT done?

- [INFO3] **Yes. In the ER, she had a head CT that was normal.**

Has she had a recent EEG?

- [INFO4] **No.**

Has she had other seizures?

- [INFO5] **When she was one she had a fever seizure, but she didn't have a fever this time. They did a spinal tap when she was one, but it turned out normal and she didn't have any more seizures until now.**

Have there been any recurrences since this seizure last week? [INFO6] **None.**

How is she doing now?

- [INFO7] **She is doing okay now—seems back to normal.**

What medications is she on now? [INFO8] **None.**

Does she have any other medical problems?

- [INFO9] **No medical problems.**

Are there any other family members with seizures? [INFO10] **No.**

What is the name of your child's doctor?

- [PCP INFO]

What ER did you take him to?

- [INFOER]

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- **Can I pay cash?**
- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

→ IF STILL NOT PROVIDED WITH AN APPOINTMENT, ASK: **Where else should I go?**

AFTER THE CALL: FILL OUT POST-CALL EVALUATION

**PSYCHIATRY condition: Depression**

**My 13 year old daughter needs to see a Psychiatrist.**

**Female Age 13**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:  
[INFO1] **We're worried about her. She seems withdrawn and depressed.**

→ IF ASKED TO ELABORATE:  
[INFO2] **Her grades have slipped at school. We took her to our family doctor, who talked to her in private and recommended that she see a psychiatrist.**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **My doctor and I are very concerned. Is there an appointment sooner than that?**

→ IF YOU ARE ASKED...

Is she on any medication? OR If they suggest she see a psychologist first...

- [INFO3] **[No medication], but her pediatrician wants her to see a psychiatrist in order to consider medication.**

Are you worried she might cause harm to herself or others?

- [INFO4] **No.**

Does your family have a history of depression or other mental health problem?

- [INFO5] **Yes, my sister, her aunt, has some mental health problems. [SPECIFICS UNKNOWN]**

What is the name of your child's doctor?

- [PCP INFO]

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- **Can I pay cash?**
- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

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AFTER THE CALL: FILL OUT POST-CALL EVALUATION

**DERMATOLOGY condition: Severe Atopic Dermatitis**

**My 9 month old daughter needs an appointment with a dermatologist.**

**Female Age 9 months (infant)**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:

[INFO1] **She has had a bad rash ever since she was about 2 months old. It is on her face, legs, and arms and she is scratching a lot. Our doctor has tried giving her steroid creams, but it is still not getting any better and he wants to get a dermatologist's opinion.**

→ IF ASKED TO ELABORATE:

[INFO2] **It is red and scaly and her doctor has tried giving her 3 different steroid creams. She often scratches until she bleeds, and she has had several skin infections from this in the past. The doctor said she should see a dermatologist.**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **She is scratching herself and seems uncomfortable. Is there something sooner?**

*IF YOU ARE ASKED...*

Is it red and scaly?

- [INFO3] **Yes.**

How long has she had the rash?

- [INFO4] **About 7 months and it has gotten worse.**

Where exactly is the rash?

- [INFO5] **On her face, neck, legs and arms.**

Do you know the names of the steroid creams that you have tried?

- [INFO6] **No, I don't have that on hand. But I know it was 3 different creams and they were all steroid creams.**

What is the name of your child's doctor?

- [PCP INFO]

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- **How much will it cost?**
- **How much do I need to bring with me on the day of the appointment?**
- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**
- 

→ IF STILL NOT PROVIDED WITH AN APPOINTMENT, ASK: **Where else should I go?**

*AFTER THE CALL: FILL OUT POST-CALL EVALUATION*

**ENDOCRINOLOGY condition: Type 1 Diabetes**

**My 7 year old son needs to see an Endocrinologist.**

**Male Age 7**

→ SEE IF YOU CAN GET A DATE. IF ASKED WHAT THE APPOINTMENT IS FOR:

[INFO1] **My 7 year old has been tired and constantly thirsty, so we saw our family doctor who tested his blood sugar and told us to get an appointment with you because he might have diabetes.**

→ IF THE DATE IS MORE THAN 2 WEEKS AWAY ADD: **My doctor and I are very concerned. Is there an appointment sooner than that?**

→ IF YOU ARE ASKED...

What was his blood sugar?

- [INFO2] **I think around 200.**

What that after fasting (or first thing in the morning before he ate?)

- [INFO3] **Yes, she tested him first thing in the morning before he ate anything.**

How much does he weigh?

- [INFO4] **About 50 pounds.**

What is his height?

- [INFO5] **About 4 feet.**

Does he have any symptoms or other health problems?

- [INFO6] **No.**

Does your family have a history of diabetes?

- [INFO7] **Yes – my mother (his grandmother) has diabetes and she takes pills.**

What is the name of your child's doctor?

- [PCP INFO]

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- [IF DAY-OF AMOUNT IS TOTAL] **Can I bring a down payment to the appointment and set up a payment plan?**

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**AFTER THE CALL: FILL OUT POST-CALL EVALUATION**